

BUILDING PERMIT APPLICATION

IF SUBSIDIARY, PROVIDE MASTER PERMIT NUMBER HERE:

Location of Improvements

Address _____ Unit _____

Folio _____

Contractor Information

Cert.No. _____

Contractor Name _____

Qualifier Name _____

Qualifier SS _____

Address _____

City _____ St _____ Zip _____

Phone _____

Use of Property

Current Use _____

Description of Work _____

Square Feet _____

Value of Work _____

Type of Improvements

- | | |
|---|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Repair |
| <input type="checkbox"/> Alteration Interior | <input type="checkbox"/> Repair due to Fire |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> () Change of Contractor | |

Owner Information

Name _____

Address _____

City _____ St _____ Zip _____

Phone _____

Architect/ Engineer

Name _____

Address _____

City _____ St _____ Zip _____

Phone _____

Item

Qty

Concrete Slabs (Sq.Ft.)

Driveway (Sq. Ft.)

Concrete Sidewalk (L.F.)

Other:

Description of Work _____

Application is hereby made to obtain a permit to do the work and installation as indicated, I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for Building Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters and Roofing work and there may be additional permits required from other governmental agencies.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate.

WARNING TO OWNER: If your job cost exceeds \$2500.00 you must file a Notice of Commencement with the Clerk of the Courts in Miami-Dade County. Failure to do so may result in you paying twice for the improvements to your property. if you intend to obtain financing, consult your attorney or lender before recording your Notice of Commencement.

Signature of Owner or Owners Agent _____

Print Name _____

Sworn to and subscribed to me this _____ day of _____ 20

Personally known () Produced Identification ()

Type of Identification Produced _____

Signature of Qualifier _____

Print Name _____

Sworn to and subscribed to me this _____ day of _____ 20

Personally known () Produced Identification ()

Type of Identification Produced _____